



*Department of Health
and Human Services*

*Maine People Living
Safe, Healthy and Productive Lives*

ICD-10 Webinar

July 29, 2015



Table of Contents

Topic	Page
ICD-10 Background Information <ul style="list-style-type: none">▪ Background▪ ICD-10 Changes▪ Benefits	2
Provider Impacts	5
Prior Authorization	9
Provider Outreach	15
Pilot Testing	17

ICD-10 Background

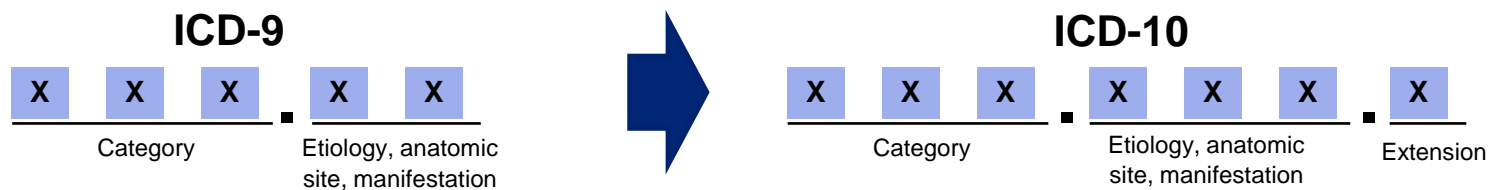


What is ICD-10?

*On **October 1, 2015**, the United States will move from the ICD-9 coding system to the ICD-10 coding system. This change will have a significant impact on provider and MaineCare processes.*

Key Differences and Changes

- ICD-10 is a much more complex scheme of classifying diseases reflecting recent advances in disease detection and treatment.
- ICD-10 involves fundamental coding changes, from 3-5 digit numeric codes in ICD-9 to 3-7 digit alphanumeric codes in ICD-10.



- ICD-9 codes are used by many providers and payers in business processes and technology systems. Changes may be required to support ICD-10.
 - Providers need to make changes to their processes and technology in order to continue uninterrupted transactions with payers, including MaineCare.
 - MaineCare is currently making changes to its processes and systems to be ready for ICD-10.

Why Switch to ICD-10?

The World Health Organization (WHO) adopted ICD-10 in 1990 and most industrialized countries have since wholly adopted it, except the U.S.

Issues With ICD-9

- Space and structural limitations - ICD-9 has no room for new codes
- Can lead to billing inaccuracy by assigning multiple procedures to a single code
- Lack of detail needed to support emerging needs such as Electronic Health Records (EHRs) and provider Pay for Performance (P4P)
- Does not support mortality reporting and biosurveillance used by the rest of the world
- Poses a barrier to comprehensive global tracking of health data

ICD-10 Transition

Benefits of ICD-10

- Better reflects current medical practices
- Supports patient care coordination across clinical settings
- Allows providers to track time spent on procedures
- Provides more specific data from clinical documentation
- Improves public health reporting and tracking
- Can improve research quality

Provider Impacts



Changes Needed by Providers to Prepare for ICD-10

Operational updates required:

- Business processes and paper and electronic forms may need to be modified to accommodate the new longer codes.
- System updates, including replacement of all ICD-9 codes are required.
 - ✓ In most cases, there is an approximate one-to-one match but not always. One ICD-9 code may correspond to many ICD-10 codes.
 - ✓ CMS has provided General Equivalence Mappings (GEMs) as a code tool that can assist providers in determining which ICD-10 codes to use.

Changes to claim submissions:

All services, prior authorizations, and discharges conducted after October 1, 2015 must use ICD-10 codes. If ICD-9 codes are submitted for dates of service on or after October 1st, claims will be denied. Consult Medicare Learning Network® (MLN) ICD-10 Guidelines for exception. These can be found on the [CMS website](#).

Training for your employees:

- Coding
- Documentation

MaineCare Updates to Prepare for ICD-10

The office of MaineCare Services is in the process of making updates to our operations in order to accommodate ICD-10 codes.

The following are changes to MaineCare operations:

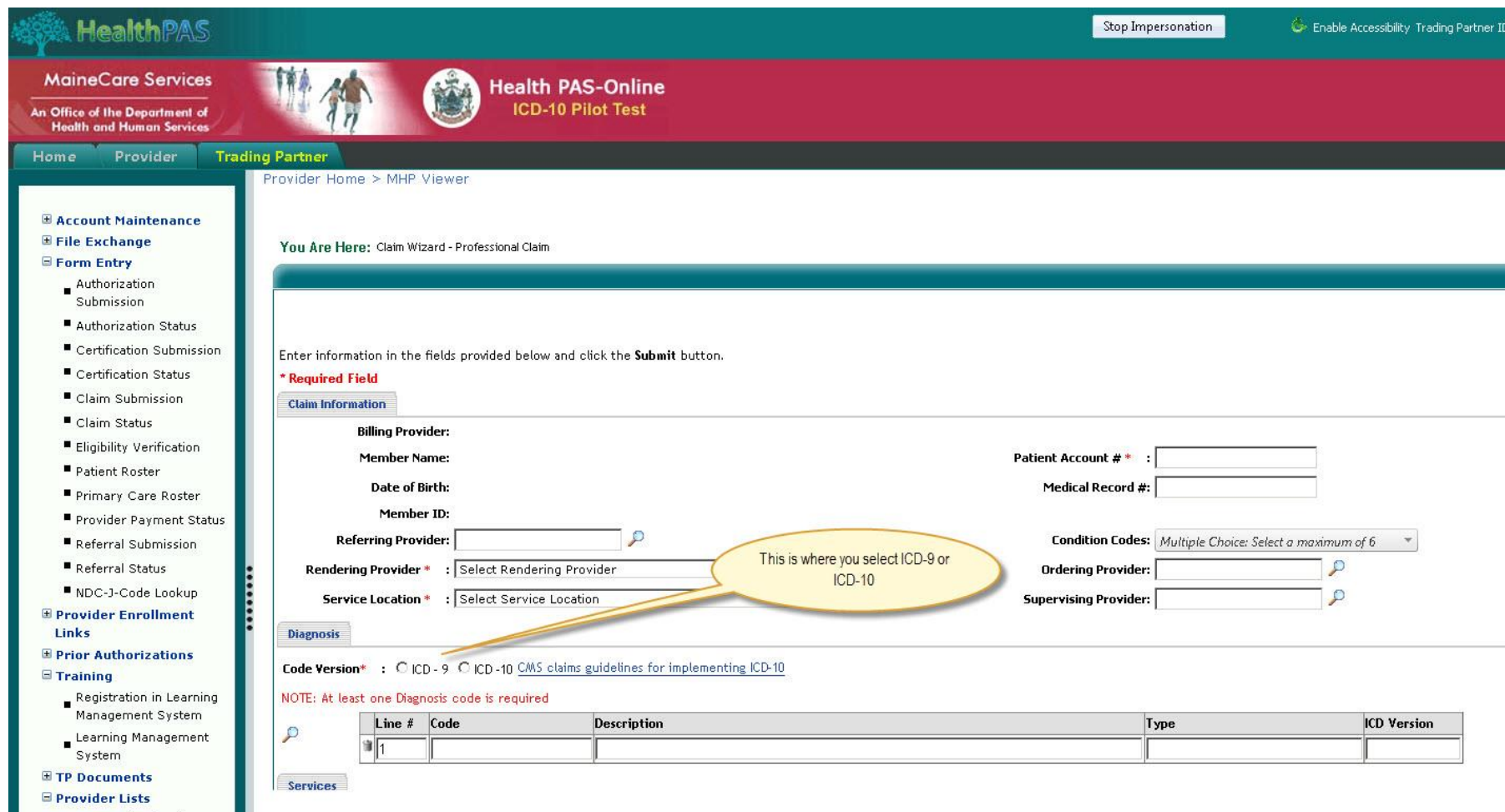
- Changes to the Health PAS Online Portal Claim Submission Screen
- New paper claim forms
- Changes to the Prior Authorization (PA) processes

Check MaineCare's ICD-10 website and listserv for other information and resources regarding ICD-10.

Claims Submission and ICD-10

The below screen is the Health PAS Online Portal Claims Submission screen. This screen will be used to submit ICD-10 codes on or after October 1, 2015.

Health PAS Online Portal – Claims Submission Screen



HealthPAS

Stop Impersonation Enable Accessibility Trading Partner ID

MaineCare Services
An Office of the Department of Health and Human Services

Health PAS-Online
ICD-10 Pilot Test

Home Provider **Trading Partner**

Provider: Home > MHP Viewer

You Are Here: Claim Wizard - Professional Claim

Enter information in the fields provided below and click the **Submit** button.

*** Required Field**

Claim Information

Billing Provider:
 Member Name:
 Date of Birth:
 Member ID:
 Referring Provider:
 Rendering Provider * : *This is where you select ICD-9 or ICD-10*
 Service Location * :

Patient Account # * :
 Medical Record #:
 Condition Codes: *Multiple Choice: Select a maximum of 6*
 Ordering Provider:
 Supervising Provider:

Diagnosis

Code Version* : ☐ ICD - 9 ☐ ICD - 10 [CMS claims guidelines for implementing ICD-10](#)

NOTE: At least one Diagnosis code is required

Line #	Code	Description	Type	ICD Version
1				

Services

Account Maintenance
 File Exchange
 Form Entry
 Authorization Submission
 Authorization Status
 Certification Submission
 Certification Status
 Claim Submission
 Claim Status
 Eligibility Verification
 Patient Roster
 Primary Care Roster
 Provider Payment Status
 Referral Submission
 Referral Status
 NDC-J-Code Lookup
 Provider Enrollment Links
 Prior Authorizations
 Training
 Registration in Learning Management System
 Learning Management System
 TP Documents
 Provider Lists

Prior Authorization



Changes to Prior Authorization

With the upcoming transition to ICD-10 codes on October 1, 2015, changes to the PA processes will be necessary.

- Any PA request must contain ICD-10 codes if the initial service will be delivered on, or after, October 1, 2015.
- The PA request must contain ICD-9 codes if the initial service will be delivered on, or prior to, September 30, 2015.
- Existing PAs with open service authorizations will be accepted for services provided on, or after, October 1, 2015 as long as the initial service is delivered prior to October 1, 2015.
- Minor change to PA request form

Examples

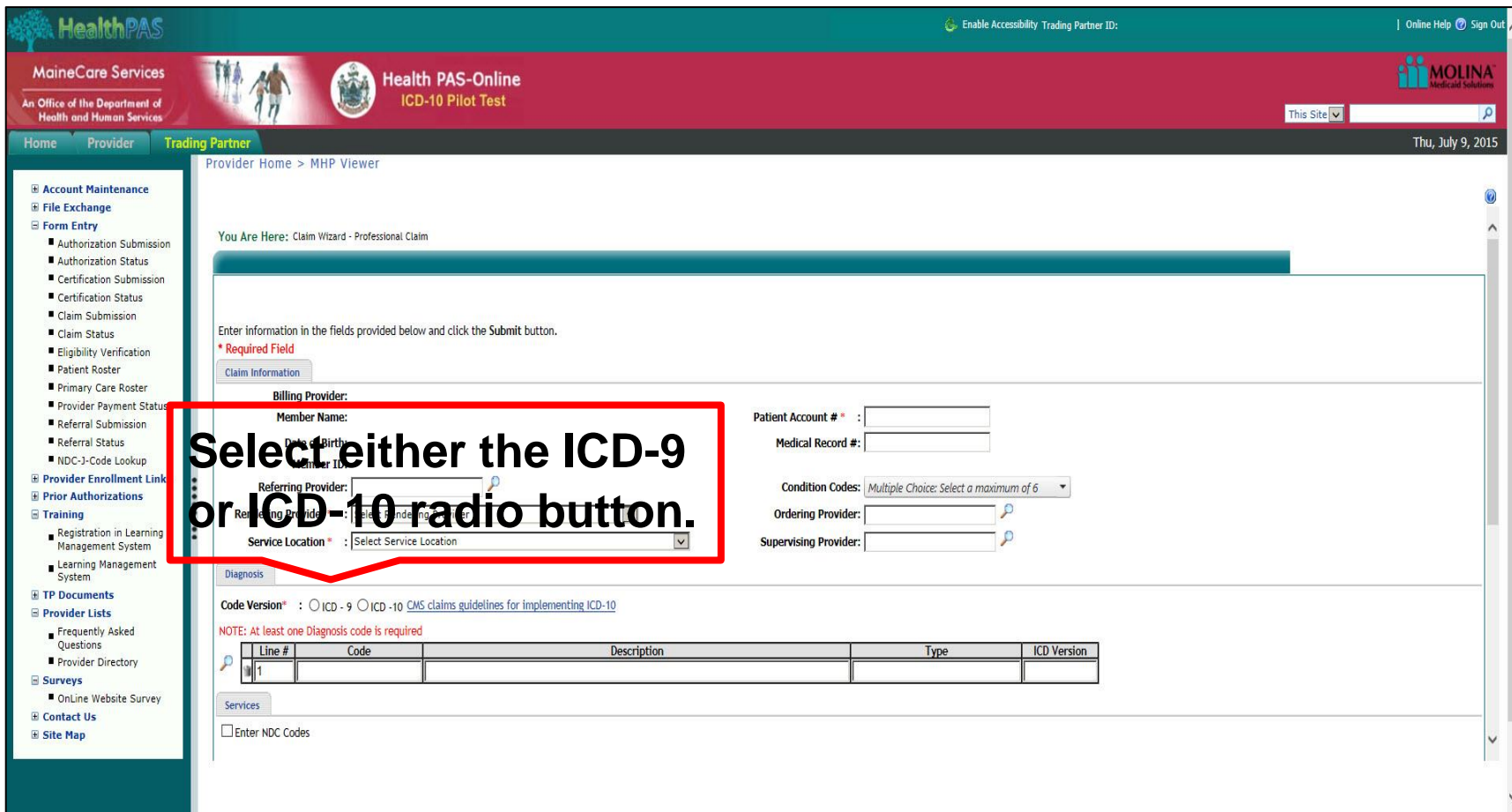
- A PA is requested and approved on September 1, 2015. The initial service is performed on September 21, 2015. **This scenario would require ICD-9 codes on the request.**
- A PA is requested and approved on September 16, 2015. The initial service is performed on October 5, 2015. **This scenario would require ICD-10 codes on the request.**
- A PA is requested on October 1, 2015 for twelve services. **This scenario would require ICD-10 codes as the initial service will occur on, or after, October 1, 2015.**
- A PA is requested and approved on January 12, 2015 for twelve services. On October 1, 2015, five services remain open on the PA. **You can continue to utilize the PA for services after October 1, 2015, until the services expire. Any claims for services on, or after, October 1, 2015 need to be submitted with ICD-10 codes. You do not need a new PA until all services are utilized.**

There is a minor change to the Prior Authorization form. In Section 1, Question 4, ICD-9 or ICD-10 diagnosis codes may be entered.

Prior Authorization and the Health PAS Online Portal

For more information about how ICD-10 will affect prior authorizations, please contact Provider Services at: 1-866-690-5585.

Health PAS Online Portal – Authorization Submission screen



HealthPAS
MaineCare Services
An Office of the Department of Health and Human Services

Health PAS-Online
ICD-10 Pilot Test

Enable Accessibility Trading Partner ID: | Online Help | Sign Out

Home Provider **Trading Partner** Thu, July 9, 2015

Provider Home > MHP Viewer

You Are Here: Claim Wizard - Professional Claim

Enter information in the fields provided below and click the Submit button.

*** Required Field**

Billing Provider:

Member Name:

Date of Birth:

Member ID:

Referring Provider:

Referring Provider:

Service Location:

Patient Account # :

Medical Record #:

Condition Codes:

Ordering Provider:

Supervising Provider:

Diagnosis

Code Version* : ☐ ICD - 9 ☐ ICD - 10 [CMS claims guidelines for implementing ICD-10](#)

NOTE: At least one Diagnosis code is required

Line #	Code	Description	Type	ICD Version
1				

Services

☐ Enter NDC Codes

APS Care Connection for Behavioral Health Providers

The APS Care Connection system is where Behavioral Health Providers enter PA requests for MaineCare Benefit Manual Sections 13, 17, 28 and 65. The screenshot below shows the location of where the ICD-10 code will be searched for or entered.

Multiaxial Assessment Screen ICD10

Member Information

Guardian Information

Administrative

Requesting Agency

Multiaxial Assessment

Services Requested

Symptoms/Behaviors

Psychiatric Medications

Clinical Indicators

Treatment and Service

RDS

Treatment Plan

Additional Reporting Data

Transition/Discharge Plan

Additional Info

Submit To APS

[<< Previous](#)
[Save & Continue >>](#)

Multiaxial Assessment

Date of Diagnostic Assessment:

Axis I/II/III

Primary Diagnosis: Other stimulant abuse NEC

Co-occurring Primary Diagnosis:

Axis I Diagnosis 1:

Axis II Diagnosis 1:

Axis II Diagnosis 2:

Axis III:

ICD10 Search

ICD10 Search

ICD10 Search

ICD10 Search

ICD10 Search

ICD10 Search

Enter ICD-10 codes here.

Axis IV

Problems in Family Relations:

Problems in Friendship/Social Relations:

Legal Issues:

School Problems:

Work Problems:

Custody/Placement Issues:

Financial Difficulties:

Problems in Living Situation:

Physical Health:

Problems With Access to HealthCare:

Other Psychosocial & Environmental Problems:

Search for ICD-10 codes here.

Axis V

Axis V Currents:

Since last authorization request, CAF Score has:

[<< Previous](#)
[Save & Continue >>](#)

APS and ICD-10 Code Search Screen

After October 1, 2015, it will be necessary to search for ICD-10 codes on the below screen in the APS system.

New ICD10 Search Screen

ICD10 Code Search Form

ICD10 Code:

Description:

For a quick search please enter 3 chars from description

ICD10 Code Search Results

Select	ICD10 Code	Description
<input type="checkbox"/>	F0633	Mood disorder due to known physiol cond w manic features

**Search for ICD-10
codes here.**

Provider Outreach



Outreach Activities

MaineCare is sharing information to providers and responding to questions from providers about ICD-10 through multiple channels.

ICD-10 Listserv Messages. MaineCare will distribute a frequent listservs about ICD-10 that includes an implementation countdown.

Provider Readiness Survey. The Provider Readiness Survey was open from April 20 to May 5, 2015. OMS received 447 responses to the survey. A summary of the results will be available available on the [MaineCare ICD-10 webpage](#).

Group Presentations and Webinars. MaineCare will continue presenting at provider association meetings and other forums. We will be hosting ICD-10 webinars throughout the summer. Please see the [MaineCare ICD-10 webpage](#) for dates and times.

Individual Outreach. MaineCare will be contacting providers who requested one-on-one communication in the Provider Readiness Survey. Contact us through the [ICD-10 Email Box](#).

Pilot Testing



Pilot Testing

MaineCare Services is committed to working with providers who process a variety of claim types in order to successfully test our changes and prepare for ICD-10.

- Pilot Test Cycle 1 and 2 are complete. In these cycles, 40 providers submitted claims, 841 EDI claims were adjudicated, 109 DDE claims were adjudicated and there were no major issues.
- Pilot Cycle 3 is underway and the claims submission window closed on July 2, 2015. Claims adjudication, issue research and resolution, and RA generation is currently in progress.
- Eighty-one providers submitted EDI and DDE claims for Cycle 3.
- User guide, questions and answers document, and orientation documents were provided to pilot testers.

Pilot Cycle

Cycle	Begin	End
1	5/11/2015	6/11/2015
2	5/26/2015	6/19/2015
3	6/22/2015	7/2/2015
4	7/13/2015	8/28/2015

Cycle 4

- Cycle 4 is an open cycle. Providers are able to submit claims throughout the cycle, until 8/28/2015.
- This is an opportunity for providers to test claim submission.
- Claims will not be adjudicated and no RAs will be generated.
- For questions about Cycle 4 pilot testing, please email the [ICD-10 email box](#).

More information



More Information

For more information, please refer to the following resources:

- MaineCare's ICD-10 website:
<http://www.maine.gov/dhhs/oms/icd-10/>
 - ✓ MaineCare's Frequently Asked Questions webpage:
<http://www.maine.gov/dhhs/oms/icd-10/faq.shtml>
- CMS resources:
 - ✓ ICD-10 Provider Resource webpage:
<http://cms.gov/Medicare/Coding/ICD10/ProviderResources.html>
 - ✓ CMS General Equivalence Mappings (GEMs):
<https://www.cms.gov/Medicare/Coding/ICD10/2015-ICD-10-CM-and-GEMs.html>
- Contact us:
 - ✓ Email Box: [ICD-10 Email Box](#)

Upcoming Webinars

Two additional webinars have been added in August. Topics will include changes to prior authorization criteria sheets, new remark codes, examples of split billing, and screen shots of the claims, referral, and prior authorization screens.

The webinars will be offered on the following dates/times:

- Tuesday, August 18th, 10-11:30 AM*
- Thursday, August 27th, 10-11:30 AM*

If you would like to join one of the webinars, please email the [ICD-10 email box](#).

*The two webinars in August will include the same topics in order to allow more than one time for providers to attend. It is only necessary to attend one of the because they will include the same material.

Questions and Answers



THANK YOU for being part of this important initiative!